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Approved for use through 04/30/2003. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

TRANSMITTAL **FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

10/563,686 **Application Number** August 3, 2006 Filing Date J. Christopher Anderson **First Named Inventor** 1652 Group Art Unit Kagnew H. Gebreyesus **Examiner Name** 54-000330US Attorney Docket Number

ENCLOSURES (check all that apply)				
X Fee Transm	ittal Form	Assignment Papers (for an Application)	After Allowance Communication to Group	
Fee A	ttached .	Drawing(s)	Appeal Communication to Board of Appeals and Interferences	
X Amendmen	t / Response	Licensing-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
Afte	r Final	Petition Routing Slip (PTO/SB/69) and Accompanying Petition	Proprietary Information	
Affid	lavits/declaration(s)	Petition to Convert to a Provisional Application	Status Letter	
X Extension of Time Request		Power of Attorney, Revocation Change of Correspondence Address	Additional Enclosure(s) (please identify below):	
Express Abandonment Request		Terminal Disclaimer	RCE (Request for continued examination) and receipt	
		Small Entity Statement	acknowledgment postcard	
Information Disclosure Statement		Request for Refund		
Certified Co	opy of Priority s)	Authorization to Charge Deposit Account Please charge Deposit Account No. 50-0893 for any additional fees associated with		
Response to Missing Parts/		this paper or during the pendency of this a for consideration of the documents enclose	pplication, including any extensions of time	
Incomplete Application		Remarks		
Response to Missing Parts under 37 CFR 1.52 or 1.53				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
Firm <i>or</i> Individual name	Gary Baker, Reg. No. 41,595, Quine Intellectual Property Law Group P.C.			
Signature				
Date July 2, 2009				
CERTIFICATE OF MAILING				
LINE TO A LEGISLA CONTROL OF INVALENCE OF IN				

envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, DC 20231 on this date:

Typed or printed name	Evelyn Comez			
Signature	// X	Date	7/2/09	
	/ \\/			

PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.		Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Application Number		10/563,686		
FEE TRANSMITTAL		Filing Date		August 3, 2006		
For FY 2009		First Named Inve	First Named Inventor		pher Anderson	
Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	Examiner Name		Kagnew H. Gebreyesus	
	I	Art Unit			1652	
TOTAL AMOUNT OF PAYMENT	(\$) 940.00	Attorney Docket	No.	54-0	00330US	
METHOD OF PAYMENT (check all	that apply)			<u>.</u>	_	
Check Credit Card Money Order None X Other(please identify): Deposit Account						
X Deposit Account Deposit Ac	count Number: 50-08	93 Deposit Ac	count Nam	ne: Quine Intellectua	al Property Law Group, P.C.	
For the above-identified dep	osit account, the Director is h					
X Charge fee(s) indicate	ed below	Charge	e fee(s) ir	ndicated below, exc	cept for the filling tee	
	I fee(s) or underpayments of	💳		rpayments	/ E	
under 37 CFR 1.16 a WARNING: Information on this form may be		n should not be included	d on this for	rm. Provide credit card	JUL 0 7 2009 8	
information and authorization on PTO-2038					<u> </u>	
FEE CA LCUL ATION	ND EV AMBLE TION ESSO					
	NDEX AMINATION FEES NG FEES SEA	ARCH FEES	EXAM	INATION FEES	C TRADENIE	
Applicat ion Type Fee	Small Entity	Small Entity	Fee (\$	Small Entity	Fees P_aid (\$)	
Utility 330		_	220	110	- 225 / Wim (8)	
Design 220		-, -	140			
Plant 220			170			
Reissue 330			650	325		
Provisional 220	110	0	0	0		
2. EXCESS CLA IM FEES				Eng (\$)	Small Entity	
<u>Fee Descri</u> <u>ption</u> Each claim over 20 (includi	na Reissues)			<u>Fee (\$)</u> 52	Fee (\$) 26	
Each independent claim ove				220	110	
Multiple dependent claims Total Claims Extra (Flaims Eog/S) m	an Daid (C)		390	195	
Total Claims Extra C	x =	ee Paid (\$)		<u>Multiple De</u> <u>Fee (\$)</u>	ependent Claims Fee Paid (S)	
HP = highest number of total claims p	oaid for, if greater than 20.	o o Doid (C)				
<u>Indep. Claims</u> <u>Extra (</u> 3 or HP =	<u>x Fee (\$)</u>	ee Paid (\$)				
HP = highest number of independent						
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer						
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
Total Sheets Extra	Sheets Number of ea	ch additional 50 or fra			(\$) <u>Fee Paid (\$)</u>	
- 100 =	/50 =				=	
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fee Paid (S)						
Other (e.g., late filing surcharge):						
Other: Request for continued examination					810	
Other: Request for extensi	on of time				130	
Other:						
Other:		-				
Other:						
SUBMITTED BY						

SUBMITTED BY					
Signature	, song Boh	Registration No. (Attorney/Agent)	41,595	Telephone 510 769-3510	
Name (Print/Type)	Gary Baker			Date 7/2/09	